#### **SUBMIT THIS FORM TO:** FOR DEPARTMENT USE ONLY LA Department of Environmental Quality Site I.D. # Office of Environmental Services AI# Public Participation and Permit Support Division Date Rec'd P. O. Box 4313 Rev'd by Baton Rouge, LA 70821-4313 Check No. Amount Phone (225) 219-3244 or (225) 219-1665 • Fax (225) 325-8283 Check Date Notification Form for Industrial Generators and Transporters of Solid Waste **THIS NOTIFICATION IS** (Check only one) The first for this site A subsequent notification FOR SUBSEQUENT NOTIFICATIONS, LIST AGENCY INTEREST (A.I.) NO. 1. Name of Operator (and Company Name, if applicable) Mailing Address 2. State \_\_\_\_\_ **Zip** \_\_\_\_\_ City \_\_\_\_\_ 3. Facility Name \_\_\_\_\_ **Actual Location/Description** (Use Street Address, if possible) 4. City \_\_\_\_\_\_ Parish \_\_\_\_\_\_ State \_\_\_\_\_\_ Zip \_\_\_\_\_\_ Degrees \_\_\_\_ Seconds \_\_\_\_\_ 5. **Location Latitude** Minutes \_\_\_\_ Seconds \_\_\_\_ **Longitude** Degrees Minutes Contact Name/Title \_\_\_\_\_ 6. **Contact Phone** Contact Fax 7. 8. **Contact Email** 9. **Property Owner** 10. Property Owner's Address

City \_\_\_\_\_

**State** \_\_\_\_\_

**Z**ip \_\_\_\_\_

11.	<b>Type and Purpose of Operation</b> (Check applicable both below the type that indicates the purpose of the operation)	V1 V 1
	Generator of Industrial Solid Waste (Generators m Generator Supplemental Attachment, p. 4)	nust also complete the Solid Waste Industrial
	Transporter (Transporters must also complete the Sep. 7, and submit appropriate fee)	olid Waste Transporter Supplemental Attachment,
12.	Certification: I have personally examined and am far attached document, and I hereby certify, under penal	
	and complete to the best of my knowledge. I am awar submitting false information, including the possibility	re that there are significant penalties for of fine and/or imprisonment.
	and complete to the best of my knowledge. I am awar	re that there are significant penalties for
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## NOTIFICATION FORM FOR INDUSTRIAL GENERATORS AND TRANSPORTERS OF SOLID WASTE DETAILED INSTRUCTIONS

- Name of Operator/Site: Enter the name of the operator and the name of the site. The operator is the person having legal authority
  and responsibility for a site where industrial solid waste is generated or where solid waste is collected, received, processed, or
  disposed.
- 2. **Mailing Address:** Enter the mailing address for the site. This office will mail all site-related correspondence to this address.
- 3. Facility Name
- 4. **Actual Location:** Enter the street address (*not Post Office Box*); highway number; or other specific identifiers, and the city and state to which the information on this form applies.
- 5. **Location:** Geographic (Section, Township, Range and Parish where the facility is located and the coordinates [as defined by the longitude and latitude to the second] of the center point of the facility).
- 6. **Contact:** Enter the name, title, business telephone/fax number of the person to contact regarding information supplied on this form and other related matters.
- 7. **Telephone:** Number of the contact person.
- 8. **Email:** Email address of the contact person.
- 9. **Owner:** Enter the name of the legal owner(s) of the property in which the site is located, using an additional sheet to list multiple owners.
- 10. **Owner's Address:** Enter the mailing address of the owner(s) of the site.
- 11. **Type of Operation(s):** The notification form categorizes operations as:
  - Generator any person whose act or process produces solid waste as defined in the regulations.
  - **Transporter** any person who moves industrial solid waste off-site and/or who moves solid waste of a commercial establishment or more than one household to a storage, processing, or disposal facility.
- 12. **Certification:** Provide the signature, typed name, date, and title of the individual authorized to sign the application.

### SOLID WASTE INDUSTRIAL GENERATOR SUPPLEMENTAL ATTACHMENT

NOTE: A Notification Form for Industrial Generators and Transporters of Solid Waste (pages 1-2) must accompany the supplemental attachment.

waste generators and commercial .	solid waste generators are not required to	o notify.)
Waste Code	Waste Code	Waste Code
Waste Name	Waste Name	Waste Name
Amount Generated (Annually)	Amount Generated (Annually)	Amount Generated (Annually)
Waste Is Disposed ☐On-site ☐Off-site	Waste Is Disposed On-site Off-site	Waste Is Disposed  On-site Off-site
Name of Disposal Facility	Name of Disposal Facility	Name of Disposal Facility
Location of Disposal Facility	Location of Disposal Facility	Location of Disposal Facility
Parish of Disposal Facility	Parish of Disposal Facility	Parish of Disposal Facility
Process Description	Process Description	Process Description
Chemical Description	Chemical Description	Chemical Description
Physical Description	Physical Description	Physical Description
Biological Description	Biological Description	Biological Description
nformation submitted in this and mmediately responsible for obtaind complete. I am aware that the possibility of fine and imprisonm CERTIFICATION: This is also	to certify that this waste is not a listed is eristics and/or process knowledge and i	n my inquiry of those individuals e submitted information is true, accuration false information, including the hazardous waste, and that this waste
		Printed Title Date

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3.

1.

2.

### SOLID WASTE INDUSTRIAL GENERATOR SUPPLEMENTAL ATTACHMENT DETAILED INSTRUCTIONS

- 1. Name of Generator of Industrial Solid Waste: Enter the company name of the generator of industrial solid waste.
- 2. **Description of Generated Industrial Solid Wastes:** For more than 3 Waste Codes, copy *Solid Waste Industrial Generator Supplemental Attachment* (p. 4), as needed, and attach. (*Residential solid waste generators and commercial solid waste generators are not required to notify.*) Wastes are described as follows:
  - Waste Code Enter the three digit number from the Industrial Waste Code List (p. 6) that describes the waste.
  - Waste Name Enter a descriptive name of the waste.
  - **Amount Generated** Enter the amount of waste to be generated annually for the period beginning July 1 and ending June 30 (include the unit of measure).
  - Waste Disposal Mark the box indicating if waste is to be disposed on-site or off-site.
  - Name of Disposal Facility Enter the name of the facility where waste is to be disposed.
  - Location of Disposal Facility Enter the street address (not Post Office Box); highway number; or other specific
    identifiers; and the city and state in which the disposal facility is located.
  - Parish of Disposal Facility Enter the name of the parish in which the disposal facility is located.
  - **Process Description** Enter a description of the process used to manufacture and/or generate the waste.
  - **Chemical Description** Enter the chemical characteristics/description of the waste.
  - **Physical Description** Enter the physical characteristics/description of the waste.
  - **Biological Description** Enter the biological characteristics/description of the waste.
- Certification: Provide the signature, printed or typed name, and title of the individual authorized to sign the application, along with the signature date.

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### INDUSTRIAL WASTE CODE LIST

An industrial waste number begins with the facility's unique Solid Waste Facility Identification Number followed by the three digit waste code that is descriptive of the industrial waste.

-001	Absorbent Pads	Sludg	res
-002	Asbestos Contaminated Material/Asbestos	-036	Cooling Tower Basin Sludge
-003	Ash/Incinerator and Boiler	-037	Impoundment Sludges/Solids
-004	Baghouse Dust	-038	Paint Waste
-005	Batteries Spent	-039	Process Unit Sludges
-006	Blasting Media	-040	Sump Waste/Solids
-007	Boiler Blowdown	-041	Tank Sludges
-008	Carbon/Carbon Black/Coke/Coal	-042	Wastewater Treatment Plant Sludges
-009	Catalyst/Cat Fines		
-010	Cement Kiln Dust	Filter	s & Filter Media
-011	Clean out material	-043	Filter Cake
-012	Contaminated Concrete and insulation	-044	Filter Media/Filters
-013	Contaminated Piping		
-014	Contaminated Sand/Soil	Aque	ous Wastes
-015	Cooling Tower Wood and Debris	-045	Acid/Base Waste (Neutralized)
-016	Desiccant	-046	Antifreeze
-017	Distillation Bottoms/Distillate	-047	API Separator Supernatant (Middle Liquid)
-018	Empty Contaminated Containers	-048	Brine (Raw)
-019	Fire Brick/Furnace Brick/Reactor Brick	-049	Cleaners (Spent Neutralized)
-020	Flocculent Solids	-050	Cooling Tower Blowdown
-021	Foundry Sand	-051	Leachate
-022	Gypsum	-052	Slurry
-023	Insulation/Non-Asbestos	-053	Tank Washwater
-024	Laboratory Wastes	-054	Wastewater, Not Otherwise Specified
-025	Lime	-055	Wastewater & Solids/Sludges
-026	Metallic Salts and Oxides		
-027	Off Spec./Spent Materials or Unused Materials	Other	Wastes
-028	PCB (Low-level PCB Contaminated Materials)	-056	Miscellaneous; Not Otherwise Specified
-029	Pesticide/Herbicide Contaminated Material	-057	LDEQ Approved E&P
-030	Plant Maintenance Debris; Contaminated Articles		
-031	Slag/Smelting of Metallic Ore		
-032	Spent Bauxite (Red Mud)		
-033	Spent Caustic		
-034	Treated Woodwaste		
-035	Vessel, Exchanger, Tank, and Pipe Scales		

### SOLID WASTE TRANSPORTER SUPPLEMENTAL ATTACHMENT

NOTE: A Notification Form for Industrial Generators and Transporters of Solid Waste (pages 1-2) must accompany the supplemental attachment.

Fees: Initial: \$165 plus \$42 per vehicle

NOTE: Please make checks payable to the LDEQ and submit to the address on page 1.

			Contact Name & Tit	tle	
Transporter Mailing A	ddress		Contact Email Addr	ress	
City	State	Zip	Contact Phone		
Transporter's Physical	Location/Street Add	dress	Contact Fax		
City	State	Zip			
Transporter's Parish					
Waste to be Transp	orted (Check eac	h applicable	(2 box)		
,, usee to see 11 unsp	ozou (emeen eue	uppreede	Special Wastes		
Industrial Waste			Asbestos		
Residential & Com	mercial Waste		Medical Waste		
Woodwaste			Grease Waste		
Waste					
Construction/Dome	lition Dobris				
Construction/Demo	olition-Debris		Other, Describe		
<b>Vehicle Information</b> year, license number,	ı (Please list all ve and name of regi.	stered owner	Other, Describe  Vill be used to transport so T, if different from transpo	rter.) For more th	~
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# SOLID WASTE TRANSPORTER SUPPLEMENTAL ATTACHMENT DETAILED INSTRUCTIONS

- 1. **Applicant Information:** Enter the following information with regard to the solid waste transporter applicant.
  - Name of Transporter Enter the company name of the solid waste transporter.
  - **Transporter Mailing Address** Enter the mailing address for the solid waste transporter. This office will mail all transporter-related correspondence to this address.
  - Transporter's Physical Location/Street Address Enter the street address (*not Post Office Box*); highway number; or other specific identifiers; and the city and state in which the solid waste transporter is located.
  - Transporter's Parish Enter the name of the parish in which the transporter is physically located.
  - **Contact Information** Enter the name, title, email address, telephone number, and fax number of the person to contact regarding information supplied on this attachment and other related matters.
- 2. **Waste to be Transported:** Indicate type of waste to be transported by marking all applicable boxes.
- 3. **Vehicle Information:** Enter the make, model, year, license number, and registered owner of the vehicles that will be used to transport solid waste. For more than 4 vehicles, attach additional page(s) with the required information as indicated in the *Solid Waste Transporter Supplemental Attachment* (p. 7) for each vehicle.
- 4. **Certification:** Provide the signature, printed or typed name, and title of the individual authorized to sign the application, along with the signature date.

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